Qualifying Changes in Status

The Internal Revenue Code requires plans that provide the tax-exempt premium to prohibit changes in the employee's deduction during the plan year unless there is a qualifying change in status. The chart below indicates those changes that employees are allowed to make which are consistent with a qualifying change in status.

EMPLOYEE – Qualifying Change	ges in St	atus							
	Corresponding HEALTH & DENTAL Options								
Changes affecting the Employee	Opt Out of Health & Dental Coverage	Enroll or Re-Enroll in the Program	Add Newly Acquired Child	Add Existing Child	Add Spouse or Civil Union Partner	Terminate Dependent Coverage	Terminate Spouse or Civil Union Partner Coverage	Change Health Carrier	Waive Health & Dental Coverage
Adjudicated Child: Employee financially responsible			Х						
Adoption (or placement for adoption)		Х	Х	Х	Х				
Birth		Х	Х	Х	Х				
Custody awarded and requires dependent coverage (court ordered)		Х	X						
Custody loss (court ordered)/Court Order expires						Х			
Divorce/Legal Separation/Annulment/ Dissolution of Civil Union		Х		Х		Х	Х		
Eligibility: Employee becomes eligible for non-State group insurance coverage	0								Р
Eligibility: Employee loses eligibility of non-State group insurance coverage (for other than nonpayment of premium)		Х		Х	X				
Employment Status: Full-time to Part-time (≥50%)						Х	Х		Р
Employment Status: Layoff	0					Х	Х		
Employment Status: Part-time participating to Full-time	0								
Employment Status: Part-time waiving coverage, or working <50%, to Full-time	0	А		Х	Х				
Initial enrollment – within 30 days	0	А		Х	Х				Р
Leave of Absence: Employee entering nonpay status	0					Х	Х		Р
Leave of Absence: Employee entering nonpay status responsible for 100%	0					Х	Х		Х
Leave of Absence: Employee returns to work from nonpay status	0	Х		Х	Х				Р
Marriage or Civil Union Partnership	0	Х	Х	Х	Х				Р
Medicaid or Medicare eligibility gained	0					Х	Х		Р
Medicaid or Medicare eligibility loss		Х		Х	Х				
Military Leave of Absence						Х	Х	Х	Х
Military Leave of Absence: Employee returns to work		Х		Х	Х			Х	
Premium increase 30% or greater: Employee's non-State health insurance		Х		Х	Х				
Premium increase 30% or greater: Employee's STATE health insurance						Х	Х		Р
Residence/Work location: Employee's county changes*								Х	

X = Eligible changes for all employees. P = Eligible changes for Part-time employees. O = Eligible changes for Full-time employees. A = Enrollment will be automatic. Newly Acquired Child = A child for which the employee gained custody within the previous 60-day period, such as a new stepchild, adopted child, adjudicated child or a child for which the employee gained court-ordered quardianship.

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Existing Child = A'child for which the employee had custody prior to the previous 60-day period, such as a natural or adopted child, adjudicated child, stepchild or a child for which the employee is guardian.

* Change allowed if health carrier unavailable in new location.

Qualifying Changes in Status

(Whenever the term 'Spouse' is indicated on this page it also includes a Civil Union Partner.)

SPOUSE - Qualifying Changes in Status									
	Corresponding HEALTH & DENTAL Options								
Changes affecting the Spouse	Employee May Opt Out of Program	Employee may Enroll or Re-Enroll in the Program	Add Newly Acquired Child	Add Existing Child	Add Spouse	Terminate Dependent Coverage	Terminate Spouse Coverage	Change Health Carrier	Waive Health/ Dental Coverage
Coordination of spouse's open enrollment period *	0	Х		Х	Х	Х	Х		Р
Death of spouse		Х		Х			Х		
Eligibility: Spouse loses eligibility for group insurance coverage		Х		Х	Х				
Eligibility: Spouse now provided with group insurance coverage	0					Х	Х		Р
Employment Status: Spouse gains employment	0					Х	Х		Р
Employment Status: Spouse loses employment		Х		Х	Х				
LOA: Spouse enters nonpay status				Х	Х				
LOA: Spouse returns to work from nonpay status						Х	Х		
Medicare eligibility: Spouse gains							Х		
Medicare eligibility: Spouse loses					Х				
Premium of spouse's employer increases 30% or greater, or spouse's employer significantly decreases coverage		Х		Х	Х				
Residence/Work location: Spouse's county changes**								Х	

^{*} The employee's request to change coverage must be consistent with, and on account of, the spouse's election change.

^{**} Only applies to members enrolled in an HMO whose HMO plan is not available in their new county.

DEPENDENT (other than Spouse) – Qualifying Changes in Status									
	Corresponding HEALTH & DENTAL Options								
Changes affecting a Dependent (other than a Spouse)	Employee May Opt Out of Program	Employee may Enroll or Re-Enroll in the Program	Add Newly Acquired Child	Add Existing Child	Add Spouse	Terminate Dependent Coverage	Terminate Spouse Coverage	Change Health Carrier	Waive Health/ Dental Coverage
Death of Dependent						Х			
Eligibility: Dependent becomes eligible for State group coverage				Х					
Eligibility: Dependent loses eligibility for non-State group coverage				Х					
Eligibility: Dependent now eligible for non-State group coverage						Х			
LOA: Dependent enters nonpay status				Χ					
LOA: Dependent returns to work from nonpay status						Х			
Medicare eligibility: Dependent gains						Х			
Medicare eligibility: Dependent loses				Х					
Residence/Work location: Dependent's county changes*								Х	

X = Eligible changes for all employees. P = Eligible changes for Part-time employees. 0 = Eligible changes for Full-time employees. Existing Child = A child for which the employee had custody prior to the previous 60-day period, such as a natural or adopted child, adjudicated child, stepchild, child of a civil union partner or a child for which the employee is guardian.

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^{*}Only applies to members enrolled in an HMO whose HMO plan is not available in their new county.